

DEPARTMENT OF FIRE, BUILDING AND LIFE SAFETY

PIMA COUNTY 400 WEST CONGRESS, SUITE 121 TUSCON, ARIZONA 85701 (520) 628-6920 (520) 628-6930 FAX 1110 WEST WASHINGTON, SUITE 100 PHOENIX, ARIZONA 85007 (602) 364-1003 (602) 364-1052 FAX

OFFICE OF ADMINISTRATION * OFFICE OF MANUFACTUED HOUSING * OFFICE OF STATE FIRE MARSHAL

LTA PETITION FOR HEARING & PROCEDURE

Attached is the petition you requested. Should you desire to petition the Department for a hearing complete the form using black ink, and return with a check for the fifty dollar (\$50) processing fee. If you prevail, the Administrative Law Judge's Order may require the opposing party to reimburse this fee. The Department does not charge any additional fees for this hearing. However, should this matter proceed through the appeal process to the Superior Court, the court may award attorney's fees to the prevailing party.

All notices, orders, and other communications from this Department regarding the case will be mailed to the petitioner, and it will be the petitioner's responsibility to ensure that the remaining petitioners promptly receive notice of such communications.

Upon receipt of the form, and your payment of the \$50.00 processing fee the Department will process your petition by requesting a response from the tenant. The Tenant has ten (10) days to respond. This Department will contact you upon receipt of the response from the landlord.

Please remit your petition for a hearing to:

Attn: LTA Dept.

DEPARTMENT OF FIRE, BUILDING & LIFE SAFETY

1110 W. Washington Ave., Suite #100

Phoenix, AZ 85007

STATE OF ARIZONA DEPARTMENT OF BUILDING & FIRE SAFETY

PETITION FOR HEARING BY THE MOBILE HOME PARKS ADMINISTRATIVE LAW JUDGE

PLEASE PRINT OR TYPE

FOR OFFICE USE ONLY LTA CASE#

This form must be completed and returned with a check In the amount of \$50 (non-refundable), and a copy of your rental agreement.

Return to: LTA DEPT.,

Department of Fire, Building & Life Safety 1110 W. Washington Ave, Suite, #100

Phoenix, AZ 85007				
PETITIONER'S NAME:	Daytime Phone:			
Name of Mobile Home Park:				
Petitioner's Address:				
City	State Zip			
Make of mobile home:	Year:			
Model:	Size:			
	lential Landlord Tenant Act, which you believe has been violates, which have been violated will not be considered and returned. Petitione cts in issue are identical.			

Name, address and phone number of the owner of the park:						
Name, address and phone number	er of the company responsible	for managemen	nt of the park:			
Name, address and phone number	er of the resident manager of t	he park:				
	est a hearing in regard to	this complain	ıt.			
PRINT NAME	ADDRESS	SPACE	SIGNATURE	DATE		